Health Care Facilities in NER

*666. SHRI ONWARD IL NONGTDU: Will the Minister of HEALTH AND FAMILY WELFARE be | ileased to state:

(a) the details of steps bei ng taken by Government to provide adequate health care facilities to poor peo pie in hilly and tribal areas of NER;

(b) the details of the proposals mooted by Government in that regard in the Ninth Five Year P.Ian; and

(c) if the answer to part (a) ahove be in the negative, the reasons therefor?

THE MINISTER OF STATE[1]. OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) to (c) Primary health care facilities in the North Eastern Region are implemented through a 3 tier structure consisting of Primary Health Centres, Community Health Centres and Sub-centres. The population norms for establishment of primary health care institutions have been relaxed for hilly/tribal areas. Sub-centres for 3000, PHC for 20,000 and CHC for 80,000 population.

The following centrally sponsored schemes are also being implemented:—

(i) Under the Blindness Control Programme, facilities for free cataract surgery are provided to the poor throughout the country including NER. An amount of Rs. 450 and Rs. 650 respectively is given to NGO's, for conventional and IOL cataract surgeries in the hilly and tribal region including those of North East which is Rs. 50 higher than other regions in the country.

(ii) National AIDS Control Programme is being implemented as a comprehensive strategy for prevention and control of HIV/AIDS in all the States/UTs including North Eastern States since 1992. To combat the spread of HIV/AIDS in this region, a special intervention known as Harm minimization programme is being implemented by States in collaboration with NGO which includes: needle exchange programme, social marketing of condoms, counselling and care & support to people living with HIV/AIDS**.** Besides, 12 zonal blood testing centres, 45 blood banks and 10 HIV testing and counselling centres and 34 sexually transmitted diseases clinics have been established. During 1999-2000, the amount of budget released to North-Eastern States was Rs. 3.88 per capita as compared to Rs. 1.30 per capita at the National level.

(iii) National Anti Malaria Programme is in operation in North Eastern States along with the rest of the country. North Eastern States are provided 100% cash and material assistance for malaria control activities as against 50:50 cost sharing basis for other States. During 1998-99, the plan expenditure on National Malaria Programme was Rs. 10.03/capita in the N-E States as compared to Rs. 1.45/capita elsewhere.

(iv) National Leprosy Eradication Programme is operative in North East as a 100% Centrally Sponsored Scheme. All districts are also provided free multi drug therapy services. Out of 8 states, five states viz. Nagaland, Meghalaya, Tripura, Sikkim and Mizoram, have reached the target of elimination of leprosy with prevalence rate of about less than one case per 10,000 population showing a very good performance in the North Eastern Region as compared to elsewhere in the country. The remaining three States are also very close to elimination.

(v) Under the drug de-addiction programme, 31 drug de-addiction centres out of 98 centres established in the country are in North Eastern Region. In addition to the one time grant, a recurring grant of Rs. 2 lakhs per year is also provided to the centres for meeting the cost of medicines and maintenance. This grant is only for the centres in North Eastern Region.

(vi) Under the Tuberculosis Control Programme, 100% requirement of Anti TB drugs are provided from the Central Govt, either in kind or with cash assistance and are made available to the patient free of cost. The revised National TB Control Programme under which norms have been further relaxed for hilly and tribal areas is being implemented in the country in phases. The districts of Imphal in Manipur and Dibrugarh in Assam are currently covered. Entire Manipur State will also be covered soon. It is also proposed to extend the programme to Arunachal Pradesh, Nagaland and Sikkim.

Under the Special Initiatives for North East, the Prime Minister has recently announced establishing a 500 bedded referral hospital at North Eastern Indira Gandhi Regional Institute of Health & Medical Sciences, Shillong at an estimated cost of Rs. 422.60 crore. In the meantime, an interim Hospital

facility has commenced having two super-specialities viz. Cardiology and Gastro-enterology backed up by a 30 bedded Hospital. It is also proposed to strengthen the Regional Institute of Medical Sciences at Imphal at an estimated cost of Rs. 94.0 crores.

Pollution from Process Industry

*667. SHRI RAMDAS AGARWAL: Will the Minister of ENVIRONMENT AND FORESTS be pleased to state:

(a) whether there is a need for systematic development of industrial areas as demanded/stressed in a workshop on Liquid and Solid Waste Management in Chemical Industry, held recently in New Delhi, as reported in the Hindustan Times dated 26th April, 2000;

(b) if so, what steps Government propose to take to contain pollution from process industry; and

(c) whether any help is being sought by Government from Indian Institute of Technology and Industry Associations in this regard?

THE MINISTER OF ENVIRONMENT AND FORESTS (SHRI TR. BAALU): (a) Yes, Sir.

(b) The steps taken by the Government to contain pollution from process industry include the following:—

— Guidelines for environmental management in industrial estates have been drawn up.

— Scheme of ZoningAtlas for identification of suitable areas for siting and systematic development of industrial estates, has been undertaken; and

— Environmental Standards for effluent and emissions from various types of process industries have been notified under the Environment (Protection) Act, 1986.

(c) Yes, Sir.

Allocation of Levy Sugar to States

*669. SHRI BACHANI LEKHRAJ: Will the Minister of CONSUMER AFFAIRS AND PUBLIC DISTRIBUTION be pleased to state:

(a) the criteria being followed by Government for allocation of levy sugar to states;